

Compensation of Hospital Employees



DOH 346-095 (REV 08/01/2016)

Calendar Year: 2019 Entity Name: Snohomish County Public Hospital District 1 dba EvergreenHealth Monroe								
(A) Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non-Taxable Benefits	(E) Total
			(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation			
1 Lisa M. LaPlante	YES	EvergreenHealth Monro	205,491	20,933		26,294	15,269	267,987
2 Renee K. Jensen		EvergreenHealth Monro	184,590	42,138	129,015	28,451	7,257	391,450
3 Brenda L. Sharkey		EvergreenHealth Monro	153,033	21,417	35,656	13,427	8,719	232,252
4 John C. Green		EvergreenHealth Monro	196,069	7,594		2,395	14,856	220,914
5 John C. Gepford		EvergreenHealth Monro	142,621	5,559		10,460	10,129	168,768
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J <http://www.irs.gov/pub/irs-pdf/i990sj.pdf>

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Community Health Systems/Hospital Financial and Charity Care Section

MS: 47853

Olympia, WA 98504-7853

email: hos@doh.wa.gov